PTO/SB/17 (10-08)
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Under the Pa	aperwork Reduction A	ct of 199	5, no person are r	equired to	respond to a collection				control number
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known Application Number 10/679,710-Conf. #9983				
							October 3, 2003		
FEE TRANSMITTAL				Filing Date					
For FY 2009						M. S. Horning	g et al.		
Applicant claims small entity status. See 37 CFR 1.27						1648			
TOTAL AMOUNT OF PAYMENT (\$) 1,110.00				Art Unit Attorney Docket	C1039.70074I	JS00			
					Automicy Booker	140.			
METHOD OF	PAYMENT (ch	eck all t	hat apply)						
Check	X Credit Card		Money Order	No	ne Other (please identif	y):		
Deposit Ac	count Deposit Acco	ount Numb	per:23/	2825	Deposit	Account Name	: Wolf, Greer	nfield & Sac	ks, P.C.
For the	above-identified	deposit	account, the D	irector is	hereby authorize	ed to: (ched	k all that apply)		
С	harge fee(s) indic	ated be	low		Charg	e fee(s) ind	dicated below, e	xcept for th	e filing fee
	harge any addition e(s) under 37 CF			ments o	f X Credit	any overpa	ayments		
FEE CALCUI		11 1.10	2110 1.17						
1. BASIC FILIN	IG, SEARCH, AN	D EXA	INATION FEI	ES					
		FILIN	G FEES	SE	ARCH FEES	EXAMIN	IATION FEES	i,	
Application T	vpe Fe	e (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility		30	165	540	270	220	110		
Design	2	220	110	100	50	140	70	1	
Plant	2	220	110	330	165	170	85	•	
Reissue	3	30	165	540	270	650	325		
Provisional	2	220	110	0	0	0	0		
2. EXCESS CL	AIM FEES							9	Small Entity
Fee Description	1							Fee (\$)	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)								52	26
Each independent claim over 3 (including Reissues)								220	110
Multiple depend		_		_				390	195
Total Claims	Extra Cl		Fee (\$)	F	ee Paid (\$)		lultiple Depend		
or HP = x = HP = highest number of total claims paid for, if greater than 20.						<u>Fe</u>	<u>e (\$)</u>	Fee Paid (\$)	1
Indep. Claims	Extra Cl	_	Fee (\$)	F	ee Paid (\$)				_
	- or HP =	X							
	nber of independent cl	aims paid	for, if greater tha	n 3.					
3. APPLICATIO	N SIZE FEE								
	ation and drawing								
	der 37 CFR 1.52(eraction thereof. S					for small ei	ntity) for each a	idditional 50	1
Total Sheet				. ,	dditional 50 or fra	ction thereo	f <u>Fee (\$)</u>	Fee F	Paid (\$)
· · · · · · · · · · · · · · · · · · ·	100 =							=	147
4. OTHER FEE					•	,		Fees	Paid (\$)
	n Specification,	\$130 fe	e (no small en	tity disc	ount)				
Other (e.g., l	late filing surchar	(ge): <u>1</u> 2	253 Extension	n for re	sponse within th	nird month	ı	1,1	10.00
SUBMITTED BY									
Signature	/Patrick R.H. Waller/				Registration No.		Telephone	617.646.8000	
Name (Print/Type) Patrick R.H. Waller			(Attorney/Agent)	,	Date				
rvame (i miv rype)	aulck n.m. V	vanei					Date	February 4	+, ∠UU9
			Certificate of	Electron	ic Filing Under 37	CFR 1.8			
	that this paper (along						g transmitted via t	he Office elect	ronic filing
 system in accord 	dance with § 1.6(a)(4).							

/Trish McDonald/

Signature: ____

(Trish McDonald)

Dated: February 4, 2009